Eill	in this information to identify your case:				
Der	otor 1 Michael DeWayne Nota First Name	Middle Name	Last Name		
	otor 2 Linda Raye Nolan  use if, filing) First Name	Middle Name	Last Name		
	, <b>3</b> ,				
Uni	ted States Bankruptcy Court for the: MID	DLE DISTRICT OF	PENNSYLVANIA		
	se number <u>1:22-bk-01932</u>			_	c if this is an ded filing
	ficial Form 106Sum				
	•		d Certain Statistical Information		12/15
info	rmation. Fill out all of your schedules firs r original forms, you must fill out a new S 	t; then complete th	are filing together, both are equally responsibl e information on this form. If you are filing ame the box at the top of this page.		
				Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 10 1a. Copy line 55, Total real estate, from Sc			\$	235,000.00
	1b. Copy line 62, Total personal property,	from Schedule A/B		\$	8,780.00
	1c. Copy line 63, Total of all property on Se	chedule A/B		. \$	243,780.00
Par	t 2: Summarize Your Liabilities				
					<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims S 2a. Copy the total you listed in Column A,		(Official Form 106D) he bottom of the last page of Part 1 of <i>Schedule D</i>	\$	214,069.99
3.	Schedule E/F: Creditors Who Have Unsec 3a. Copy the total claims from Part 1 (prio		Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	15,707.49
	3b. Copy the total claims from Part 2 (non	priority unsecured cl	aims) from line 6j of Schedule E/F	\$	1,205.49
			Your total liabiliti	es \$	230,982.97
Par	t 3: Summarize Your Income and Expe	nses			
4.	Schedule I: Your Income (Official Form 100 Copy your combined monthly income from		<i>I</i>	. \$	5,292.65
5.	Schedule J: Your Expenses (Official Form Copy your monthly expenses from line 22c			\$	4,168.00
Par	t 4: Answer These Questions for Admi	nistrative and Stati	stical Records		
6.	Are you filing for bankruptcy under Cha  No. You have nothing to report on this	•	neck this box and submit this form to the court with	your other sc	hedules.
7.	■ Yes What kind of debt do you have?				

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

Summary of Your Assets and Liabilities and Certain Statistical Information

Official Form 106Sum

the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_3,269.06

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	15,707.49
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	15,707.49

	County			prop	At least or	and Debtor 2 only the of the debtors and on you wish to add a cation number: g.		(see ins	structions)	munity property
	Franklin				has an inte	=	? Check one	(such as fe	ee simple, ten e), if known.	our ownership interest ancy by the entireties, o
	Shippensbur	g PA State	<b>17257-0000</b> ZIP Code		Land Investmen				perty? 85,000.00	Current value of the portion you own? \$235,000.00
1.1	8117 Molly P Street address, if ava			. <b>=</b>	Single-fam  Duplex or  Condomin	multi-unit building	ыу	the amount	of any secure	nims or exemptions. Put d claims on Schedule D: ns Secured by Property.
1. Do		any legal or ed				ling, land, or similar				
Sc In eac think inform	it fits best. Be as mation. If more sp er every question	A/B: Plantely list and do complete and ace is needed,	roperty lescribe items. List accurate as possil attach a separate	ole. If two sheet to t	married pe his form. O	ople are filing togetl	her, both are o itional pages,	equally resp	onsible for su	12/15 the category where you pplying correct e number (if known).
Cas	e number 1:2	2-bk-01932								☐ Check if this is an amended filing
	use, if filing) ed States Bankri	First Name uptcy Court for		lle Name	T OF PENI	Last Name NSYLVANIA				
Deb		First Name  Linda Raye		lle Name		Last Name				
			Nayne Nolan							

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debt Debt		lichael DeV inda Raye	Vayne Nolan Nolan		Case number (if known)	1:22-bk-01932
3. <b>C</b> a	rs, vans	, trucks, trac	tors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
0.4	Malaa	Chevrole	at	Who has an interest in the manner of O	Do not deduct sec	ured claims or exemptions. Put
3.1	Make: Model:	Impala		Who has an interest in the property? Check one ☐ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2008		Debtor 2 only	Creditors Who ria	
		mate mileage:	202000	■ Debtor 1 and Debtor 2 only	Current value of tentire property?	the Current value of the portion you own?
	• • •	formation:		☐ At least one of the debtors and another	onino proporty:	portion you own.
	Value	per NADA.			*	
		-		☐ Check if this is community property (see instructions)	\$1,250 	0.00 \$1,250.00
3.2	Make:	Chevrole	et	Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Equinox		☐ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2015		Debtor 2 only	Current value of	the Current value of the
	Approxi	mate mileage:	199000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		☐ At least one of the debtors and another		
	Value	per NADA		☐ Check if this is community property (see instructions)	\$2,650	\$2,650.00
				n for all of your entries from Part 2, includin		\$3,900.00
.pa	iges you _	nave attach	ed for Part 2. Write	that number nere	=>	Ψο,οοοίου
			onal and Household Ite	ems terest in any of the following items?		Current value of the
		·				portion you own? Do not deduct secured claims or exemptions.
<i>E</i> :	kamples: No		furnishings nces, furniture, linens	, china, kitchenware		
	Yes. De	escribe				
			Normal househousehousehousehousehousehousehouse	old Goods and furnishings		\$3,200.0
E:	No	Televisions a		eo, stereo, and digital equipment; computers, p	rinters, scanners; music c	<u>·</u>
			3 Tvs. Compute	r, Printer, Cell phone		\$650.0
			o i va, compute	i, i initel, oeli pilone		Ψ030.0

Debtor 1 Debtor 2	Michael DeWayne Nolan Linda Raye Nolan Case num	nber (if known)	1:22-bk-01932
Exampl	bles of value  les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects other collections, memorabilia, collectibles	s; stamp, coin,	or baseball card collections;
■ No □ Yes.	Describe		
	<ul> <li>lent for sports and hobbies</li> <li>les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, musical instruments</li> </ul>	skis; canoes	and kayaks; carpentry tools;
■ No □ Yes.	Describe		
10. <b>Firearr</b> <i>Exam</i> µ ■ No	ms oles: Pistols, rifles, shotguns, ammunition, and related equipment		
_	Describe		
11. <b>Clothe</b> <i>Exam</i> ☐ No	es ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
■ Yes.	Describe		
	Debtors Clothing		\$650.00
□ No	oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, wat Describe  Costume Jewlery		\$175.00
Exam <sub>l</sub>	nrm animals ples: Dogs, cats, birds, horses  Describe		
	46 Cats, 1 dog and 1 bird.		\$0.00
■ No	ther personal and household items you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list, including any health aids you did not already list.	lid not list	
	the dollar value of all of your entries from Part 3, including any entries for pages you have art 3. Write that number here	attached	\$4,675.00
	escribe Your Financial Assets		
Do you ov	wn or have any legal or equitable interest in any of the following?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
■ No	oles: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you	file your petiti	on

	ebtor 1 ebtor 2	Michael Del Linda Raye	Vayne Nolan Nolan			Case number	(if known) 1:	22-bk-01932
17.	Examp				unts; certificates of deposit; shares with the same institution, list each.		okerage hous	ses, and other similar
	□ No ■ Yes				Institution name:			
			17.1 <b>Ch</b>	aakina	Orrstown Bank - Check	dina.		\$205.00
			17.1. <b>Ch</b>	ecking	Olistown Balik - Olieck	wiig		Ψ203.00
18.	Examp	, <b>mutual funds</b> , bles: Bond funds			kerage firms, money market accou	unts		
	■ No □ Yes		Instit	ution or issuer n	ame:			
19.	Non-pu joint vo □ No		tock and inter	ests in incorpo	rated and unincorporated busin	nesses, including a	n interest in	an LLC, partnership, and
	Yes.	Give specific in	formation abou Name of			% of ownersh	nip:	
			Preciou operati		t, LLC - No Assets and not	100%	%	\$0.00
21.	■ No □ Yes.  Retirent Examp ■ No	Give specific info	ormation about Issuer na n accounts IRA, ERISA, K	them ame: eogh, 401(k), 40	osfer to someone by signing or del o3(b), thrift savings accounts, or ot Institution name:	Š	t-sharing plar	ns
22.	Your sl		prepayments ed deposits you	have made so t	that you may continue service or ublic utilities (electric, gas, water),			or others
	■ No □ Yes.				Institution name or individua	al:		
23.	Annuiti ■ No	ies (A contract f	or a periodic pa	syment of money	y to you, either for life or for a num	ber of years)		
	■ No □ Yes	ls	ssuer name and	description.				
24.	26 U.S.0	ts in an educati C. §§ 530(b)(1),			alified ABLE program, or under	a qualified state tu	uition progra	m.
	■ No □ Yes	lr	nstitution name	and description.	. Separately file the records of any	interests.11 U.S.C.	§ 521(c):	
25.	■ No	•			her than anything listed in line 1	1), and rights or po	wers exercis	sable for your benefit
		Give specific in						
26.	Examp ■ No		main names, we	ebsites, proceed	d other intellectual property Is from royalties and licensing agre	eements		

	otor 1 otor 2	Michael DeWayne Nolan Linda Raye Nolan	Case number (if known) 1	:22-bk-01932
_		es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association hold	dings, liquor licenses, professional licenses	
		Give specific information about them		
Мо	ney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
ı	No	unds owed to you  Give specific information about them, including whether you already fi	led the returns and the tax years	
ı	Examp ■ No	support les: Past due or lump sum alimony, spousal support, child support, m Give specific information	aintenance, divorce settlement, property se	ttlement
	Examp ■ No	mounts someone owes you  les: Unpaid wages, disability insurance payments, disability benefits, benefits; unpaid loans you made to someone else  Give specific information	sick pay, vacation pay, workers' compensa	ation, Social Security
ı	Examp ■ No	ts in insurance policies les: Health, disability, or life insurance; health savings account (HSA)  Name the insurance company of each policy and list its value.  Company name:	; credit, homeowner's, or renter's insurance Beneficiary:	Surrender or refund
ı	If you a someo	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurar ne has died.  Give specific information	nce policy, or are currently entitled to receive	value: e property because
ı	Examp ■ No	against third parties, whether or not you have filed a lawsuit or reles: Accidents, employment disputes, insurance claims, or rights to surprise each claim		
ı	No	ontingent and unliquidated claims of every nature, including cou	unterclaims of the debtor and rights to se	et off claims
ı	No	ancial assets you did not already list Give specific information		
36.		ne dollar value of all of your entries from Part 4, including any en		\$205.00
Par	t 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. Lis	at any real estate in Part 1.	
	No. Go	wn or have any legal or equitable interest in any business-related propert to Part 6. o to line 38.	ty?	

Deb Deb	tor 1 tor 2	Michael DeWayne Nolan Linda Raye Nolan		Case number (if known)	1:22-bk-01932
Part		cribe Any Farm- and Commercial Fishing-Related Property You On u own or have an interest in farmland, list it in Part 1.	wn or Have an Interes	st In.	
46. <b>I</b>	Do you	own or have any legal or equitable interest in any farm- or	commercial fishin	g-related property?	
	No. 0	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You D	id Not List Above		
	Examp	have other property of any kind you did not already list? les: Season tickets, country club membership			
	No Yes. C	Give specific information			
54.	Add th	ne dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1:	Total real estate, line 2			\$235,000.00
56.	Part 2	: Total vehicles, line 5	\$3,900.00		
57.	Part 3	: Total personal and household items, line 15	\$4,675.00		
58.	Part 4:	: Total financial assets, line 36	\$205.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total p	personal property. Add lines 56 through 61	\$8,780.00	Copy personal property to	otal <b>\$8,780.00</b>

\$243,780.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Fill in this info	rmation to identify your	case:		
Debtor 1	Michael DeWayne	Nolan		
	First Name	Middle Name	Last Name	
Debtor 2	Linda Raye Nolar	1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number	1:22-bk-01932			
(if known)				☐ Check if this is an amended filing

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Ident	fy the	Pro	perty	You	Claim	as	Exempt
---------------	--------	-----	-------	-----	-------	----	--------

	☐ You are claiming state and federal nonban	S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11 l								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	8117 Molly Pritcher Highway Shippensburg, PA 17257 Franklin	\$235,000.00		\$22,283.01	11 U.S.C. § 522(d)(1)				
	County CMA pending. Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	2015 Chevrolet Equinox 199000 miles Value per NADA	\$2,650.00		\$2,650.00	11 U.S.C. § 522(d)(2)				
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
	Normal household Goods and furnishings	\$3,200.00		\$3,200.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit					
	3 Tvs, Computer, Printer, Cell phone Line from Schedule A/B: 7.1	\$650.00		\$650.00	11 U.S.C. § 522(d)(3)				
	Ellie IIolii ooliloodie 702.			100% of fair market value, up to any applicable statutory limit					
	Debtors Clothing Line from Schedule A/B: 11.1	\$650.00		\$650.00	11 U.S.C. § 522(d)(3)				
	Line i.e solitodale /v.b. 1111			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor 2	·			Case number (if known)	1:22-bk-01932	
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Check only one by Schedule A/B		ck only one box for each exemption.		
	estume Jewlery e from Schedule A/B: 12.1	<b>\$175.00</b> ■		\$175.00	11 U.S.C. § 522(d)(4)	
LIN	e Irom Scriedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
	ecking: Orrstown Bank - Checking	\$205.00	\$205.00		11 U.S.C. § 522(d)(5)	
LIN	e Irom Scriedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit		
	e you claiming a homestead exemption of ubject to adjustment on 4/01/25 and every 3			ed on or after the date of adjustmer	nt.)	
	Yes. Did you acquire the property covere	d by the exemption w	ithin 1	215 days before you filed this case	?	
	□ No					
	☐ Yes					

Fill in this infor	mation to identify you	ır case:			
Debtor 1	Michael DeWay	ne Nolan			
	First Name	Middle Name Last Name			
Debtor 2	Linda Raye Nol	an			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ba	ankruptcy Court for the	MIDDLE DISTRICT OF PENNSYLVANIA			
Case number	1:22-bk-01932				
(if known)					if this is an
				ameno	ded filing
Official For	m 106D				
		W			
Schedule	D: Creditors	Who Have Claims Secure	a by Property	/	12/15
	e Additional Page, fill it	If two married people are filing together, both are ed out, number the entries, and attach it to this form. C			
1. Do any creditor	s have claims secured by	y your property?			
☐ No. Ched	k this box and submit t	his form to the court with your other schedules. Y	You have nothing else to	report on this form.	
_	n all of the information	·	•	•	
		pelow.			
	All Secured Claims		Column A	Column B	Column C
		more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	y Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Credit Ad	cceptance	Describe the property that secures the claim:	value of collateral. \$1,353.00	claim \$1,250.00	If any <b>\$103.00</b>
Creditor's Nan		2008 Chevrolet Impala 202000 miles	Ψ1,333.00	Ψ1,230.00	Ψ103.00
Attn: Bar	nkruptcy est 12 Mile Road	Value per NADA.			
Ste 3000		As of the date you file, the claim is: Check all that apply.			
Southfiel	ld, MI 48034	☐ Contingent			
Number, Stree	et, City, State & Zip Code	Unliquidated			
Who owes the d	ebt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)			
Debtor 1 and D	Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of	the debtors and another	☐ Judgment lien from a lawsuit			
Check if this community d		Other (including a right to offset)			

Opened 12/20 Last

Date debt was incurred Active 09/22

8210

Last 4 digits of account number

Debtor	1 Michael D	eWayne Nolai	n		Case	e number (if known)	1:22-bk-01932	
	First Name	Middle N		Last Name				
Debtor	2 Linda Ray	re Nolan						
	First Name	Middle N	lame	Last Name				
1991-	elect Portfoli ervicing, Inc	io	Describe t	the property that secures the c	:laim:	\$212,716.99	\$235,000.00	\$0.00
	reditor's Name			olly Pritcher Highway		<u> </u>		
٨	.ttn: Bankrup	tov		nsburg, PA 17257 Frank	klin			
	o Box 65250			date you file, the claim is: Checl	k all that			
-	alt Lake City		apply.  Conting	ront				
_	umber, Street, City, S		Unliquid	•				
	wes the debt?		☐ Dispute					
_	or 1 only		_	eement you made (such as morto				
_	tor 2 only		- An agre		gage or secured	1		
	tor 1 and Debtor 2	) only	_	ry lien (such as tax lien, mechani	ic's lion)			
	ast one of the del	,		ent lien from a lawsuit	ics liett)			
	ast one of the det			including a right to offset)				
	nmunity debt	siales to a	Other (i	including a right to onset)				
		Opened 2/09/06						
		<b>Last Active</b>						
Date de	bt was incurred	5/20/21	Las	st 4 digits of account number	1308			
		-		this page. Write that number h	nere:	\$214,069	0.99	
	is the last page that number her		the dollar va	alue totals from all pages.		\$214,069	0.99	
Part 2:	List Others t	o Be Notified fo	or a Debt Th	hat You Already Listed				
trying to	o collect from yo e creditor for an	u for a debt you o	owe to some t you listed i	oout your bankruptcy for a deb one else, list the creditor in Pa n Part 1, list the additional cre	rt 1, and then	list the collection age	ency here. Similarly, if you h	nave more
[]		Street, City, State &			On which lir	ne in Part 1 did you ent	er the creditor? _2.2_	
	c/o Select Po PO Box 6525	ortfolio Servic			Last 4 digits	of account number	_	

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Filli	n this informati	ion to identify your ca	ise:							
Deb		Michael DeWayne N	Nolan					_		
		First Name	Middle N	ame	Last Name					
Deb <sup>o</sup>		Linda Raye Nolan First Name	Middle N	ame	Last Name			_		
Unit	ed States Bankru	uptcy Court for the:	MIDDLE DI	STRICT OF PENNS	LVANIA			_		
Cas	e number 1:22	2-bk-01932								
(if kno	wn)			=					☐ Check	if this is an
									amend	ed filing
ገffi	cial Form 1	106F/F								
		: Creditors Wh	n Have	Unsecured (	laime					12/15
		curate as possible. Use					194 941	LNONE	DIODITY ILLE IL	
	and case number	uation Page to this page. er (if known).	,						,	,
	LIST All OT	f Your PRIORITY Unse	ecured Clai	ms						
		f Your PRIORITY Unse								
1. I		have priority unsecured								
1. I	Oo any creditors h	have priority unsecured								
1. I   	Oo any creditors h  ☐ No. Go to Part 2  ☐ Yes.  List all of your pridentify what type obossible, list the cla	have priority unsecured	claims again  If a creditor he both priority a according to t	as more than one priorit nd nonpriority amounts, ne creditor's name. If yo	list that claim I u have more the	here and	show both pr	riority ar	nd nonpriority amount	ts. As much as
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or 2 Linda Raye Nolan		Case number (if known)	1:22-bk-01932	
Pennsylvania Deparment of Revenue	Last 4 digits of account number	\$1,750.52	\$643.63	\$1,106
Priority Creditor's Name  1 Revenue Place	When was the debt incurred?			
Harrisburg, PA 17129			_	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply		
_	☐ Contingent			
☐ Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
At least one of the debtors and another	☐ Domestic support obligations			
Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government		
the claim subject to offset?	☐ Claims for death or personal injury	•		
No	☐ Other. Specify			
Yes	2018-2020 Ta	xes		
No. You have nothing to report in this part. Submit  Yes.  st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each c	this form to the court with your other schools alphabetical order of the creditor who laim. For each claim listed, identify what the	b holds each claim. If a credit ype of claim it is. Do not list cla	aims already included in	n Part 1. If more
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Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 24610 Oklahoma City, OK 73124 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other schells and the creditor who laim. For each claim listed, identify what is creditors in Part 3.If you have more than Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim and Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separate	pholds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl 9411  Opened 2/09/06 Las 8/20/18  is: Check all that apply  d claim:  aration agreement or divorce the	aims already included in laims fill out the Continu  Total  St Active	n Part 1. If more uation Page of claim

Debtor 2	Michael DeWayne Nolan Linda Raye Nolan		Case number (if known) 1:2	2-bk-01932
4.2	Capital One/Walmart	Last 4 digits of account number	3297	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 04/03 Last Activ	
-	Salt Lake City, UT 84130  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	<ul><li>□ Debtor 1 only</li><li>■ Debtor 2 only</li><li>□ Debtor 1 and Debtor 2 only</li></ul>	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured  ☐ Student loans  ☐ Obligations arising out of a separations.		u did not
	Is the claim subject to offset?  ■ No □ Yes	report as priority claims  Debts to pension or profit-sharin  Other. Specify	g plans, and other similar debts	
	Comenity Bank/Overstock	Last 4 digits of account number	9782	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 09/15 Last Activ 9/17/16	/e
-	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	,	u did not
	■ No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Charge Acc	count	
	Comenity Bank/Peebles Nonpriority Creditor's Name	Last 4 digits of account number	6317	\$0.00
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 9/16/18 Last Ac 9/16/18	etive
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	l claim:	
	At least one of the debtors and another	Student loans	a vialili.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you	u did not
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	

Debtor Debtor	1 Michael DeWayne Nolan 2 Linda Raye Nolan		Case number (if known)1	:22-bk-01932
4.5	Credit Acceptance	Last 4 digits of account number	1402	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 25505 West 12 Mile Road Ste 3000 Southfield, MI 48034	When was the debt incurred?	Opened 04/17 Last Ac 2/05/18	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that	you did not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	•	
4.6	Credit Acceptance	Last 4 digits of account number	6551	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 25505 West 12 Mile Road Ste 3000	When was the debt incurred?	Opened 04/17 Last Ac 4/27/20	tive
	Southfield, MI 48034  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only			
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	l alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that	you did not
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	•	
4.7	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	2645	\$0.00
	Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 1/03/16 Last 4/20/17	Active
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that	you did not
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l	

	r 2 Linda Raye Nolan		Case number (if known)	1:22-bk-01932	
4.8	Fay Servicing Llc	Last 4 digits of account number	5412		\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 809441	When was the debt incurred?	Opened 2/09/06 L	ast Active	
	Chicago, IL 60680  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	☐ Yes	Other. Specify Real Estate	Mortgage		
4.9	Fortiva	Last 4 digits of account number	7638		\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 105555 Atlanta, GA 30348	When was the debt incurred?	Opened 09/20 Last 12/21/21	t Active	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	· ·	,	
	No	Debts to pension or profit-sharir	ng plans, and other similar de	ebts	
	Yes	Other. Specify Credit Card	I		
4.1	Geisigner Clinic Nonpriority Creditor's Name	Last 4 digits of account number			\$847.00
	100 North Academy Avenue Danville, PA 17822	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar de	ebts	
	☐Yes	Other. Specify Medical			

Linda Raye Nolan		Case number (if known)	1:22-bk-01932	
Syncb/home Design	Last 4 digits of account number	0191		\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 07/00 Last 12/04	t Active	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
Yes	Other. Specify			
Synchrony Bank/ HH Gregg  Nonpriority Creditor's Name	Last 4 digits of account number	0812		\$0.00
Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 01/02 Last 08/05	t Active	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar de	ebts	
☐ Yes	Other. Specify			
Synchrony Bank/ Old Navy	Last 4 digits of account number	8550		\$0.00
Nonpriority Creditor's Name				
Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 01/08 Last 06/08	t Active	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt	Obligations arising out of a sepa	aration agreement or divorce	that you did not	
Is the claim subject to offset?	report as priority claims			
■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
Yes	Other. Specify			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 9

Debtor 1 Debtor 2	Michael DeWayne Nolan Linda Raye Nolan		Case number (if known)	1:22-bk-01932	
	Synchrony Bank/Gap	Last 4 digits of account number	2252		\$0.00
i I	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 10/04 La 01/06	st Active	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
,	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorc	ce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar	debts	
I	□ Yes	Other. Specify			
.1	Synchrony Bank/JCPenney	Last 4 digits of account number	4808		\$0.00
4	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 10/05 La: 03/09	st Active	
Ī	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
ļ	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
ļ	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorc	ce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar	debts	
I	Yes	Other. Specify			
	Synchrony Bank/Sams	Last 4 digits of account number	5964		\$0.00
, 1	Nonpriority Creditor's Name Attn: Bnakruptcy Po Box 965060	When was the debt incurred?	Opened 11/03 La 05/06	st Active	
	Orlando, FL 32596  Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply		
	Who incurred the debt? Check one.	no or me date you me, me claim	or oncor an that apply		
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	_			
		☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorc	ce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar	debts	
	□ Yes				
	<b>—</b> 103	Other. Specify			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 9

Linda Raye Nolan		Case number (if known)	1:22-bk-01932	
Synchrony/American Eagle	Last 4 digits of account number	4873		\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 07/05 Las 12/07	t Active	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepreport as priority claims	aration agreement or divorce	e that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar d	ebts	
Yes	Other. Specify			
Verizon Wireless	Last 4 digits of account number			\$261.7
Nonpriority Creditor's Name 500 Technology Drive	When was the debt incurred?			<u> </u>
Weldon Spring, KS 66304  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
☐ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepreport as priority claims	aration agreement or divorce	e that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar d	ebts	
☐ Yes	Other. Specify			
Verizon Wireless	Last 4 digits of account number			\$96.7
Nonpriority Creditor's Name 500 Technology Drive Weldon Spring, KS 66304	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sep.	aration agreement or divorce	e that you did not	
Is the claim subject to offset?	report as priority claims			
■ No	Debts to pension or profit-sharing	ng plans, and other similar d	ebts	
□Yes	Other. Specify			

Wells Fargo Home Mortgage	Last 4 digits of account number	6084	
Nonpriority Creditor's Name Attn: Written Correspondence Po Box 10335 Des Moines, IA 50306	When was the debt incurred?	Opened 2/09/06 Last Active 12/28/16	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Real Estate	Specific	
List Others to Be Notified About a Deb	.=		

Last 4 digits of account number

Line 2.1 of (Check one):

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

On which entry in Part 1 or Part 2 did you list the original creditor?

■ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 15,707.49
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 15,707.49
	٠,		•	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 1,205.49
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 1,205.49

Official Form 106 E/F

Name and Address

PO Box 12051

**Internal Revenue Servce** 

Philadelphia, PA 19105

**Special Procedures** 

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 9

Fill in this inform				
Debtor 1	Michael DeWayne	Nolan		
	First Name	Middle Name	Last Name	
Debtor 2	Linda Raye Nolar	1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number	1:22-bk-01932			
(if known)				Check if this is an amended filing
				amended illing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	Ony		Oldio	Zii Codo	
2.0	Name				_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	<u> </u>				
2.7	Nama				_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	1401116				
	Number	Street			
	City		State	ZIP Code	_
	City		Oldio		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	information to identify yo	our case:			
Debtor 1	Michael DeWa	yne Nolan			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Linda Raye No	Middle Name	Last Name		
	ates Bankruptcy Court for the		OF PENNSYLVANIA		
C	han 4:00 lala 04000				
Case num (if known)	ber <u>1:22-bk-01932</u>				Check if this is an mended filing
Ott: -: -	I Гата 400I I				
	I Form 106H				
Sched	lule H: Your Co	debtors			12/15
your name	e and case number (if know	wn). Answer every ques		this page. On the top of any Add	ilionai rages, write
■ No					
☐ Yes	3				
			y property state or territory , Puerto Rico, Texas, Washin	? (Community property states and gton, and Wisconsin.)	territories include
	. Go to line 3. s. Did your spouse, former s	pouse, or legal equivalen	t live with you at the time?		
in line Form	e 2 again as a codebtor on	ly if that person is a gua	arantor or cosigner. Make s	your spouse is filing with you. I ure you have listed the creditor of G). Use Schedule D, Schedule E	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and	nd ZIP Code		Column 2: The creditor to who Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	<u> </u>
				☐ Schedule G, line	_
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	<del></del>
-	Number Street				
	City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Fill	in this information to iden	ntify your ca	se.				1			
			ayne Nolan							
	otor 2 Line	da Raye N	lolan							
Unit	ted States Bankruptcy Co	ourt for the:	MIDDLE DISTRICT O	F PENNSYLVANIA						
Of Sc Be a suppose	fficial Form 100  chedule I: You  s complete and accura plying correct informati use. If you are separate ch a separate sheet to t  t1:  Describe Emp	6  ur Inco te as poss ion. If you a d and you his form. C	ible. If two married peo are married and not filin spouse is not filing wi	ig jointly, and your s th you, do not includ	pòuse le infor	is liv mati	13 income a  MM / DD/ Y  and Debtor 2), both ing with you, included about your spo	ent showing as of the formal yyyy  The are equivalent information in the property of the prope	nation about you ore space is need	12/15 for ir ded,
1.	Fill in your employme			Dobtos 4			Dobtor 2	or non fi	ling one	
	information.  If you have more than cattach a separate page information about additionable employers.	with	Employment status Occupation	■ Employed □ Not employed Security			☐ Emplo	yed	ling spouse	
	Include part-time, seaso self-employed work.	onal, or	Employer's name	Titan Security G	roup					
	Occupation may include or homemaker, if it appl		Employer's address	616 W Monroe S Chicago, IL 6066						
			How long employed th	nere? 2.5 year	s					_
Estii spou	mate monthly income a use unless you are separate or your non-filing spouse space, attach a separate	as of the da ated. se have mo te sheet to t	te you file this form. If y re than one employer, co his form.	mbine the informatior		•		n on the lii	•	Ū
2.			y, and commissions (be alculate what the monthly		2.	\$	3,701.40	\$	0.00	
3.	Estimate and list mon	thly overti	те рау.		3.	+\$	0.00	+\$	0.00	

Calculate gross Income. Add line 2 + line 3.

3,701.40

0.00

Case number (if known)

1:22-bk-01932

				Fo	r Debtor 1		or Debtor 2 or on-filing spouse
	Сору	line 4 here	4.	\$	3,701.40	\$_	0.00
5.	List a	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	718.75	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
	5e.	Insurance	5e.	\$	0.00	\$	0.00
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	5g.	Union dues	5g.	\$	0.00	\$	0.00
	5h.	Other deductions. Specify:	_5h.+	\$	0.00	+ \$ _	0.00
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	718.75	\$_	0.00
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,982.65	\$_	0.00
8.	List a 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00
	8e.	Social Security	8e.	\$	1,562.00	\$	748.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$_	0.00	\$_	0.00
	8g.	Pension or retirement income	8g.	\$_	0.00	\$_	0.00
	8h.	Other monthly income. Specify:	_8h.+	\$_	0.00	+ \$_	0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,562.00	\$_	748.00
10.	Calcu	ulate monthly income. Add line 7 + line 9.	0. \$		4,544.65 + \$		748.00 = \$ 5,292.65
	Add t	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					
11.	Includ other	all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your of friends or relatives.  It include any amounts already included in lines 2-10 or amounts that are not a sify:	depen				
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ <b>5,292.65</b>
10	De						Combined monthly income
13.	■ yo	ou expect an increase or decrease within the year after you file this form?  No.	•				
		Yes. Explain:					

Fill	in this informa	ation to identify y	our case:							
Deb	tor 1	Michael DeV	Vavne No	lan		Cł	neck if	this is:		
			<b>,</b>				An	amended filing		
	tor 2	Linda Raye	Nolan						ving postpetition chap	oter
(Spo	ouse, if filing)						13	expenses as of	the following date:	
Unit	ed States Bank	ruptcy Court for the	: MIDDLE	E DISTRICT OF PENNSYL	VANIA		MM	I / DD / YYYY		
Cas	e number 1	:22-bk-01932								
(If kı	nown)									
Oi	fficial Fo	orm 106J								
		J: Your	Evnor	1606						12/15
Be info	as complete ormation. If n nber (if know	and accurate as	s possible. eeded, atta ry questio	. If two married people ar ich another sheet to this						:
1.	Is this a joi		311014							
	☐ No. Go to	o line 2.								
	Yes. Doe	es Debtor 2 live	in a separ	ate household?						
		lo								
		-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Househ	old of D	ebtor :	2.		
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		_	Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
3.	Do your ex	penses include	_						☐ Yes	
	expenses of yourself an	of people other to d your depende	than ents?	No Yes						
		nate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this for	m as a	sunni	ement in a Cha	inter 13 case to ren	ort
exp		a date after the		y is filed. If this is a supp						
				government assistance it						
(Off	ficial Form 10	061.)					_	Your expe	enses	
4.		or home owners nd any rent for th		ses for your residence. In or lot.	nclude first mortgage	4.	\$_		1,132.00	
	If not include	ded in line 4:								
	4a. Real	estate taxes				4a.	\$		0.00	
	4b. Prope	erty, homeowner'	s, or renter	's insurance		4b.	. –		0.00	
	4c. Home	e maintenance, re	epair, and ι	upkeep expenses		4c.	\$ _		150.00	
_		eowner's associa				4d.			0.00	
5	Legoitibba	mortaada navm	onte for w	nur residence, such as ho	ma aquity lagne	5	æ		0.00	

Official Form 106J Schedule J: Your Expenses page 1

	tor 1 Michael DeWayne Nolan tor 2 Linda Raye Nolan	Case number (if know	n) 1:22-bk-01932
Don	Linua Raye Notati	Case number (ii know	
6.	Utilities:	Ω- Φ	005.00
	6a. Electricity, heat, natural gas	6a. \$	365.00
	6b. Water, sewer, garbage collection	6b. \$	181.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 6d. \$	205.00
7	6d. Other. Specify: Oil (Yearly Monthly Average)	6d. \$ 7. \$	280.00
7. 8.	Food and housekeeping supplies Childcare and children's education costs	7. \$ 8. \$	550.00 0.00
9.	Clothing, laundry, and dry cleaning	9. \$	125.00
-	Personal care products and services	10. \$	75.00
11.		11. \$	165.00
	<b>Transportation.</b> Include gas, maintenance, bus or train fare.	π. ψ	103.00
12.	Do not include car payments.	12. \$	490.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
14.	Charitable contributions and religious donations	14. \$	0.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45- 0	
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	145.00
16	15d. Other insurance. Specify: <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.	15d. \$	0.00
10.	Specify:	16. \$	0.00
17	Installment or lease payments:		0.00
• • • •	17a. Car payments for Vehicle 1	17a. \$	205.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report	as	0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106		0.00
19.	Other payments you make to support others who do not live with you.	\$	0.00
00	Specify:	19.	_
20.	Other real property expenses not included in lines 4 or 5 of this form or on Section 20a. Mortgages on other property	cnedule I: Your Income 20a. \$	e. 0.00
	20b. Real estate taxes	20a. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21	Other: Specify:	21. +\$	0.00
۷.,			0.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	.   \$	4,168.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2 \$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,168.00
23	Calculate your monthly net income.		
_0.	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,292.65
	23b. Copy your monthly expenses from line 22c above.	23b\$	4,168.00
	,,,		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	23c. Subtract your monthly expenses from your monthly income.		4 404 65
	The result is your monthly net income.	23c. \$	1,124.65
24.	For example, do you expect to finish paying for your car loan within the year or do you expect y modification to the terms of your mortgage?  No.		ncrease or decrease because of a
	Yes. Explain here:		

Fill in this infor					
Debtor 1	Michael DeWayne	Nolan			
	First Name	Middle Name	Last Name		
Debtor 2	Linda Raye Nolar	1			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	PENNSYLVANIA		
Case number	1:22-bk-01932				
(if known)				☐ Check if amende	f this is an ed filing

### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone wh	no is NOT an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I h that they are true and correct.  X /s/ Michael DeWayne Nolan Michael DeWayne Nolan Signature of Debtor 1	ave read the summary and schedules filed with this declaration and
Date <b>October 28, 2022</b>	Date <b>October 28, 2022</b>

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Cill is	this info	ermation to identify you	r casa:					
		ormation to identify you						
Debto	ו וכ	Michael DeWayr First Name	Middle Name	Last Name				
Debto	or 2	Linda Raye Nola						
	e if, filing)	First Name	Middle Name	Last Name				
Unite	d States I	Sankruptcy Court for the:	MIDDLE DISTRICT OF P	ENNSYLVANIA				
Case	number	1:22-bk-01932						
(if knov		1.22 58 01002				heck if this is an		
					a	mended filing		
Offi	<u>cial F</u>	<u>orm 107</u>						
Sta	temer	nt of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22		
					equally responsible for sup			
		more space is needed, wn). Answer every que		this form. On the top of any	/ additional pages, write you	ir name and case		
Port :	· Civ	, Dotaila Abaut Your Ma	arital Status and Where You	Lived Peters				
Part				Lived Belore				
1. V	Vhat is yo	our current marital statu	is?					
	Marri	ed						
	☐ Not n	narried						
2. C	ouring the last 3 years, have you lived anywhere other than where you live now?							
	<b>.</b>	No.						
•	■ No T Yes	list all of the places you l	ived in the last 3 years. Do no	ot include where you live now	1			
		. ,						
	Debtor 1		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
	Mid to die	. 1 1 0 1 1 1		-1 t1 t				
					ity property state or territory co, Texas, Washington and W			
	_				•	,		
	■ No	Males acres con till and Cal	la a de da 11. Varra Cardabéa na 10.	#:-:-! F 40CLI\				
	☐ Yes.	wake sure you fill out Scr	hedule H: Your Codebtors (Of	Ticiai Form 106H).				
Part 2	2 Exp	lain the Sources of You	r Income					
4 -	ما برمید ام	ava anvinceme from on	unlerment er frem eneretin			ador vocas		
F	ill in the t	otal amount of income yo	u received from all jobs and a	all businesses, including part-		idar years?		
lf	you are f	iling a joint case and you	have income that you receive	e together, list it only once ur	der Debtor 1.			
	□ No							
	Yes.	Fill in the details.						
			Daliford		Dalifar 0			
			Debtor 1	Crean in come	Debtor 2	Creas in same		
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions		
				exclusions)		and exclusions)		
		1 of current year until	■ Wages, commissions,	\$21,421.50	■ Wages, commissions,	\$0.00		
the d	ate you f	iled for bankruptcy:	bonuses, tips		bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2021)	■ Wages, commissions, bonuses, tips			\$9,800.40
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2020 )		\$34,827.00	■ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
Include income regardless of wh and other public benefit paymen winnings. If you are filing a joint	ome during this year or the two nether that income is taxable. Exacts; pensions; rental income; intercase and you have income that y ncome from each source separate	amples of other income are a lest; dividends; money collec- you received together, list it of	ted from lawsuits; royalties; ar only once under Debtor 1.	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3: List Certain Payments Y	ou Made Before You Filed for I	Bankruptcy		
□ No. Neither Debtor 1 no individual primarily for During the 90 days border □ No. Go to lin □ Yes List below paid that not inclute * Subject to adjustment.	we wach creditor to whom you pain t creditor. Do not include payment de payments to an attorney for the nent on 4/01/25 and every 3 years	d you pay any creditor a total d a total of \$7,575* or more into the for domestic support obligations bankruptcy case.	I of \$7,575* or more?  n one or more payments and ations, such as child support	the total amount you and alimony. Also, do
During the 90 days b	2 or both have primarily consu before you filed for bankruptcy, die		I of \$600 or more?	
■ No. Go to lin		d = 1-1-1-1-1 <b>(</b> 0000	Idha tatal assault	ot and discorping
include	we each creditor to whom you pain payments for domestic support of for this bankruptcy case.			
Creditor's Name and Address	Dates of payme	nt Total amount	Amount you Was this	payment for

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	tor 2	Linda Raye Nolan		Cas	se number (if known)	1:22-bk-01	932
	<i>Inside</i> of whi	n 1 year before you filed for bankruptoers include your relatives; any general particle you are an officer, director, person in incess you operate as a sole proprietor.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which you g securities; and an	u are a genera ly managing a	al partner; corporations gent, including one for
	_	No Yes. List all payments to an insider.					
	_	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	inside Includ	n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cosi		nents or transfer a	any property on ac	count of a d	ebt that benefited an
	_	Yes. List all payments to an insider					
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Part	· <b>4</b> ·	Identify Legal Actions, Repossession	s and Foreclosures				
	List al modifi	n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	ie case
	Check	n 1 year before you filed for bankrupto k all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?
	Cred	litor Name and Address	Describe the Property		Date		Value of the property
			Explain what happened				property
	accou	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fii	nancial institution	, set off any a	amounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or ar		rty in the possess	ion of an assignee	e for the bene	efit of creditors, a
	_	Yes					
Part	5:	List Certain Gifts and Contributions					
13.	<b>I</b>	<b>n 2 years before you filed for bankrupt</b> No	cy, did you give any gifts	with a total value	of more than \$600	) per person	?
		Yes. Fill in the details for each gift.					
	per p	s with a total value of more than \$600 person	Describe the gifts		Dates the gi	you gave fts	Value
	Pers Addr	on to Whom You Gave the Gift and ress:					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Debtor 1 Michael DeWayne Nolan

	otor 2 Linda Raye Nolan			Case number (if known)	1:22-bk-0	1932
14.	Within 2 years before you filed for bankr  ■ No □ Yes. Fill in the details for each gift or co	,	, , , ,	ns with a total value	of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed		s you ributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	you lose anything b	ecause of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lethe amount that insurance has paid. It ce claims on line 33 of Schedule A/B:	List pending loss	of your	Value of property lost
Par	t 7: List Certain Payments or Transfers	5		. ,		
16.	consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition process.	preparin	g a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.  Person Who Was Paid  Address  Email or website address  Person Who Made the Payment, if Not Y	′ou	Description and value of any prop transferred		payment ansfer was e	Amount of payment
	Jacobson, Julius & Harshberger 8150 Derry Street Harrisburg, PA 17111 Debtor				/2022 - ig Fee	\$313.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that  No Yes. Fill in the details.	ditors or	to make payments to your creditor		fer any prope	rty to anyone who
	Person Who Was Paid Address		Description and value of any prop transferred		payment ansfer was	Amount of payment
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have alr	ir busine s made a	ess or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details.  Person Who Received Transfer		Description and value of	Describe any pro	nerty or	Date transfer was
	Address  Person's relationship to you		Description and value of property transferred	Describe any pro payments receiv paid in exchange	ed or debts	Date transfer was made
	i croon a relationally to you					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Part 9: Identify Property You Hold or Control for Someone Else

Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Address (Number, Street, City,

State and ZIP Code)

to it?

Nο

Official Form 107

Yes. Fill in the details.

**Owner's Name** 

Address (Number, Street, City, State and ZIP Code)

Where is the property? (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

Describe the property

Value

have it?

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Desc

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  No							
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Date of notice			
25.	Have you notified any governmental unit of any	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)		Date of notice			
26.	Have you been a party in any judicial or admini	istrative proceeding under any en	nvironmental law? Include settlements and	d orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)		Status of the case			
Par	11: Give Details About Your Business or Con	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	any of the following connections to any b	usiness?			
	☐ A sole proprietor or self-employed in a	ed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing execu	utive of a corporation					
	☐ An owner of at least 5% of the voting o	r equity securities of a corporatio	on				
	■ No. None of the above applies. Go to Part	t 12.					
	Yes. Check all that apply above and fill in	the details below for each busine	ess.				
	Business Name Do Address	escribe the nature of the business	s Employer Identification number Do not include Social Security nu	mber or ITIN.			
		ame of accountant or bookkeeper					
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statemen		e all financial			
	■ No						
	Yes. Fill in the details below.						
	Name Da Address (Number, Street, City, State and ZIP Code)	ate Issued					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Michael Dewayne Nolan				4 00 11 04000
Debtor 2 Linda Raye Nolan		Case number (i	f known)	1:22-bk-01932
Part 12: Sign Below				
I have read the answers on this Statement of Fina				
are true and correct. I understand that making a f				property by fraud in connection
with a bankruptcy case can result in fines up to \$	250,000, or imp	risonment for up to 20 years, or both.		
18 U.S.C. §§ 152, 1341, 1519, and 3571.				
/s/ Michael DeWayne Nolan	/s/ Lin	da Raye Nolan		
Michael DeWayne Nolan	Linda	Raye Nolan		
Signature of Debtor 1	Signat	ure of Debtor 2		
Date October 28, 2022	Date	October 28, 2022		
Did you attach additional pages to Your Statemer	nt of Financial /	Affairs for Individuals Filing for Bankro	uptcy (	Official Form 107)?
■ No		· ·		•
□Yes				
Li Tes				
Did you pay or agree to pay someone who is not	an attorney to h	elp you fill out bankruptcy forms?		
■ No				

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this inforr	Fill in this information to identify your case:						
Debtor 1 Michael DeWayne Nolan							
Debtor 2 (Spouse, if filing)	Linda Raye Nolan						
United States E	Bankruptcy Court for the: Middle District of Pennsylvania						
Case number (if known)	1:22-bk-01932						

According to	the calculations required by this						
According to the calculations required by this Statement:							
<ul> <li>1. Disposable income is not determined un</li> <li>11 U.S.C. § 1325(b)(3).</li> </ul>							
	osable income is determined under 11 C. § 1325(b)(3).						
3. The	commitment period is 3 years.						
☐ 4. The	☐ 4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 3,269.06 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

				Column A Debtor 1		Column B Debtor 2 non-filing	or	
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend the Social Security Act. Instead, list it he		benefit under	r				
	For you	\$	0.00					
	For your spouse	\$	0.00					
	Pension or retirement income. Do not benefit under the Social Security Act. Als not include any compensation, pension, United States Government in connection disability, or death of a member of the urpay paid under chapter 61 of title 10, the does not exceed the amount of retired pair fetired under any provision of title 10 or	so, except as stated in the next spay, annuity, or allowance paid with a disability, combat-related iformed services. If you receive n include that pay only to the exay to which you would otherwise	sentence, do by the d injury or ed any retired that it be entitled		0.00	\$	0.00	
	Income from all other sources not list. Do not include any benefits received und received as a victim of a war crime, a crid domestic terrorism; or compensation, pe United States Government in connection disability, or death of a member of the unsources on a separate page and put the	ler the Social Security Act; payn me against humanity, or internal nsion, pay, annuity, or allowance with a disability, combat-related liformed services. If necessary,	nents tional or e paid by the d injury or	\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pa	iges, if any.	+	\$	0.00	. \$	0.00	
	Calculate your total average monthly in each column. Then add the total for Colu			3,269.06	+ \$	0.00	<b>=</b> \$	3,269.06
Part	2: Determine How to Measure You	r Deductions from Income						tal average onthly income
13.	Copy your total average monthly inco Calculate the marital adjustment. Chee  You are not married. Fill in 0 below.	ck one:					\$	3,269.06
	You are married and your spouse is							
	You are married and your spouse is Fill in the amount of the income listed dependents, such as payment of the Below, specify the basis for excluding adjustments on a separate page.  If this adjustment does not apply, each of the second seco	s not filing with you.  ed in line 11, Column B, that was e spouse's tax liability or the spo ng this income and the amount of	ouse's suppo	ort of someor	e other t	han you or yo	ur depend	ents.
			\$					
			Φ.					
			+\$					
	Total		\$	0.0	00 c	opy here=>		0.00
14.	Your current monthly income. Subtra	act line 13 from line 12.					\$	3,269.06
15.	Calculate your current monthly incomplete.  15a. Copy line 14 here=>	•	•				\$	3,269.06

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

ebtor 1 Debtor 2		da Raye Nolan		Case number (if known)	1:22-bk-01	932	
	M	fultiply line 15a by 12 (the number of months in	ı a year).			x 12	
15	ib. T	he result is your current monthly income for the	e year for this part of	f the form		\$39,228.72_	
16. <b>Cal</b>	culat	e the median family income that applies to	you. Follow these st	reps:			
16a	ı. Fill i	in the state in which you live.	PA	-			
16b	. Fill i	in the number of people in your household.	2	_			
	To f	n the median family income for your state and ind a list of applicable median income amounts ructions for this form. This list may also be ava the lines compare?	s, go online using the			\$ 74,805.00	
17a	ı. <b>I</b>	Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). Go to Part 3. Do N					
17b	o. C	Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calc</b> your current monthly income from line 14 a	ulation of Your Disp				
Part 3:	Ca	alculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)				
8. <b>Co</b> p	ру уо	ur total average monthly income from line 1	1.		\$	3,269.06	
con spo	tend t use's	the marital adjustment if it applies. If you are that calculating the commitment period under 1 income, copy the amount from line 13. e marital adjustment does not apply, fill in 0 on	I1 U.S.C. § 1325(b)(		our <b>-</b> \$	0.00	
150		e mantai adjustinent does not apply, iii iii o on	ine 13a.		Ψ.		
19b	. Sub	otract line 19a from line 18.				\$3,269.06	
		e your current monthly income for the year.				s 3,269.06	
20a		by line 19b				Ψ	
	Muli	tiply by 12 (the number of months in a year).				<b>x</b> 12	
20b	. The	result is your current monthly income for the y	ear for this part of th	ne form		\$39,228.72	
20c	. Cop	by the median family income for your state and	size of household fr	om line 16c		\$74,805.00	
21.	Hov	v do the lines compare?					
		Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the co	ourt, on the top of page 1 of this f	orm, check bo	x 3, The commitment	
		Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwise orde	ered by the court, on the top of pa	ge 1 of this for	rm, check box 4, The	
Part 4:	Si	ign Below					
By	signin	ig here, under penalty of perjury I declare that	the information on th	nis statement and in any attachme	ents is true and	d correct.	
		hael DeWayne Nolan el DeWayne Nolan	X	/s/ Linda Raye Nolan Linda Raye Nolan			
		re of Debtor 1		Signature of Debtor 2			
Date		Ctober 28, 2022 M / DD / YYYY		Date October 28, 2022 MM / DD / YYYY			
If yo	ou che	ecked 17a, do NOT fill out or file Form 122C-2.					

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 3

Debtor 1 Debtor 2 Michael DeWayne Nolan
Linda Raye Nolan

Case number (if known)

1:22-bk-01932

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	<b>'</b> :	Liquidation
\$2	245	filing fee
\$	78	administrative fee
+ \$	15	trustee surcharge
\$3	38	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court Middle District of Pennsylvania

In re	Michael DeWayne Nolan Linda Raye Nolan		Case No.	1:22-bk-01932
	-	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	NEY FOR DE	BTOR(S)	

1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(1) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, or as	greed to be	paid to me, for services rendered or to
	For legal services, I have agreed to accept		\$	5,000.00
	Prior to the filing of this statement I have received		\$	0.00
	Balance Due		\$	5,000.00
2.	\$ of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person unles	s they are	members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
6.	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspects of t	he bankrup	otcy case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of creditor</li> <li>d. [Other provisions as needed]</li> <li>Debtors have executed a written fee agree using the loadstar method. The Debtors attorneys fees for work performed in the the case opening. The hourly rate for the</li> </ul>	ement of affairs and plan which may rs and confirmation hearing, and an eement setting forth the calcua have deposited with counsel case, plus remibursed counse	be require y adjourned ation of at the sume el \$313.00	d; d hearings thereof; ttorney's fees at an hourly rate of \$0.00 to be applied to for the filing fee to be spent in
7.	By agreement with the debtor(s), the above-disclosed fee	does not include the following serv	ice:	
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for pays	nent to me	for representation of the debtor(s) in
	October 28, 2022	/s/ Chad J. Julius		
	Date	Chad J. Julius		
		Signature of Attorney  Jacobson, Julius & H	arshberg	er
		8150 Derry Street	ui oi iboi g	<b>.</b> .
		Ste. A		
		Harrisburg, PA 17111 717-909-5858 Fax: 7	7-909-77	88
		cjulius@ljacobsonlav		
		Name of law firm		

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		Debtor(s)	Chapter	13	
	VEDIELOAD		A CENTER TO		

VERIFICATION OF CREDITOR MATRIX						
The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.						
Date:	October 28, 2022	/s/ Michael DeWayne Nolan				
		Michael DeWayne Nolan				
		Signature of Debtor				
Date:	October 28, 2022	/s/ Linda Raye Nolan				
		Linda Raye Nolan				
		Signature of Debtor				